

SAMPLE INSTRUCTION LETTER FOR THE SUCCESSFUL VENDOR
(1/2006)

INSTRUCTIONS: REVISE OR DELETE AS NEEDED.

AFTER THE NOTICE OF INTENT TO AWARD IS ISSUED, VENDORS HAVE 7 CALENDAR DAYS TO PROTEST THE NOTICE OF INTENT TO AWARD. IT IS RECOMMENDED THAT YOU WAIT UNTIL AFTER THE PROTEST PERIOD TO EXECUTE THE CONTRACT.

YOU CAN WORK WITH THE SUCCESSFUL BIDDER OR OFFEROR DURING THIS TIME TO PREPARE TO SIGN THE CONTRACT.

REVIEW THE SOLICITATION AND THE PROPOSED CONTRACT. LIST EVERYTHING THAT THE VENDOR WILL NEED TO PROVIDE PRIOR TO EXECUTING THE CONTRACT.

DETERMINE WHETHER THE SOLICITATION PROVISIONS OR THE VENDOR'S RESPONSE NEED TO BE INCORPORATED INTO THE CONTRACT. CONTACT YOUR ASSISTANT ATTORNEY GENERAL FOR ASSISTANCE.

OBTAIN NEEDED CERTIFICATES OF INSURANCE AND PERFORMANCE BONDS BEFORE EXECUTING THE CONTRACT.

IF THE LIMITED INDEMNIFICATION AND INSURANCE REQUIREMENT APPENDIX WAS USED, THE VENDOR WILL NEED TO PROVIDE A CERTIFICATE OF INSURANCE.

IF THE INTERMEDIATE INDEMNIFICATION AND INSURANCE REQUIREMENTS APPENDIX WAS USED, THE VENDOR WILL NEED TO PROVIDE A CERTIFICATE OF INSURANCE WITH AN ADDITIONAL INSURED ENDORSEMENT.

ATTACH THE APPROPRIATE SAMPLE CERTIFICATE OF INSURANCE. FROM THE GUIDELINES TO MANAGING CONTRACTUAL RISK FOUND ON THE OMB STATE PROCUREMENT OFFICE WEBSITE AT
[HTTP://WWW.STATE.ND.US/CSD/SPO/AGENCY-INFO-PAGE.HTM](http://www.state.nd.us/csd/spo/agency-info-page.htm).

DELETE ALL INSTRUCTIONS BEFORE PRINTING.

STATE OF NORTH DAKOTA
AGENCY OR INSTITUTION NAME
ADDRESS
CITY, STATE ZIP
TELEPHONE AND FAX NUMBER

LETTER OF INSTRUCTION FOR SUCCESSFUL VENDOR

DATE

SOLICITATION NUMBER AND TITLE: INSERT

OPENING DATE AND TIME: INSERT

Congratulations! The State of North Dakota through its **AGENCY NAME** "State" has announced its intent to award your company a contract for the solicitation referenced above.

You are instructed not to begin work, purchase materials, or enter into subcontracts relating to the project until both your firm and the State sign the contract.

The terms of the solicitation and proposed contract require your firm to furnish the following prior to execution of the contract:

SELECT ONE OF THE FOLLOWING:

- Certificate of Insurance with an Additional Insured Endorsement that meets the requirements of **INSERT SOLICITATION SECTION NUMBER** related to indemnification and insurance requirements.

OR

- Certificate of insurance that meets the provisions of the **INSERT SOLICITATION SECTION NUMBER** related to indemnification and insurance requirements.

LIST OTHER REQUIREMENTS, AS NECESSARY:

- A performance bond that meets the provisions of **INSERT SECTION NUMBER** of the solicitation.

If you have any questions, please feel free to contact me.

Sincerely,

NAME

Procurement Officer

PHONE: **INSERT**

FAX: **INSERT**

E-MAIL: **INSERT**

Enclosure